

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF MASSACHUSETTS

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Ameritrans Capital Corporation

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 52-2102424

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

31 State Street  
Boston, MA 02109

Number, Street, City, State & ZIP Code

Suffolk  
County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify:

Debtor **Ameritrans Capital Corporation**  
Name

Case number (if known)

**7. Describe debtor's business**

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☒ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. Check all that apply:
- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Ameritrans Capital Corporation**  
Name

Case number (if known)

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

**Where is the property?**

Number, Street, City, State & ZIP Code

**Is the property insured?**

☐ No

☐ Yes. Insurance agency

Contact name

Phone

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

**15. Estimated Assets**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☒ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

**16. Estimated liabilities**

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☒ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF MASSACHUSETTS

Case number (if known)

Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

Request for Relief, Declaration, and Signatures

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 3, 2016  
MM / DD / YYYY

X

  
Signature of authorized representative of debtor

Robert Ammerman  
Printed name

Title Interim CEO and Chairman of the Board

18. Signature of attorney

X

  
Signature of attorney for debtor

Date October 3, 2016  
MM / DD / YYYY

Michael J. Goldberg  
Printed name

Casner & Edwards, LLP  
Firm name

303 Congress Street  
Boston, MA 02210  
Number, Street, City, State & ZIP Code

Contact phone 617-426-5900

Email address \_\_\_\_\_

551869  
Bar number and State

**Fill in this information to identify the case:**

Debtor name Ameritrans Capital Corporation

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 3, 2016

X /s/ Robert Ammerman

Signature of individual signing on behalf of debtor

Robert Ammerman

Printed name

Interim CEO and Chairman of the Board

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Ameritrans Capital Corporation**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206Sum**  
**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **736,163.80**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **736,163.80**

**Part 2: Summary of Liabilities**

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **0.00**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **12,854,403.33**

4. **Total liabilities** .....  
Lines 2 + 3a + 3b

\$ **12,854,403.33**

## Fill in this information to identify the case:

Debtor name **Ameritrans Capital Corporation**United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206A/B

## Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Boston Private Bank & Trust****\$26,677.63****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$26,677.63****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. **Misc. prepaid expenses****\$1,297.89****9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$1,297.89**

Debtor Ameritrans Capital Corporation Case number (If known) \_\_\_\_\_  
Name

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments**

13. Does the debtor own any investments?

- ☐ No. Go to Part 5.  
☒ Yes Fill in the information below.

			Valuation method used for current value	Current value of debtor's interest
14.	<b>Mutual funds or publicly traded stocks not included in Part 1</b> Name of fund or stock:			
15.	<b>Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture</b> Name of entity: % of ownership			
	<b>Soha Terrace LLC; debtor is participant (70%) in 6% equity interest and \$1,000,000 capital account in entity owning a condominium building development in South Harlem, NY; interest is currently subject of arbitration</b>			
15.1.	<u>subject of arbitration</u>	<u>4.2</u> %	<u>Estimated value</u>	<u>\$700,000.00</u>
15.2.	<u>MBS Sage Creek Ltd</u>	<u>&lt;1%</u> %		<u>\$0.00</u>
15.3.	<u>MBS Walnut Creek, Ltd</u>	<u>&lt;1%</u> %		<u>\$0.00</u>
15.4.	<u>Elk Associates Funding Corp.</u>	<u>100%</u> %		<u>\$0.00</u>

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**  
Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$700,000.00

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.



Debtor Ameritrans Capital Corporation Case number (If known) \_\_\_\_\_  
Name

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture			
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Computer equipment (purchase price: \$15,248.36)	\$0.00		Unknown

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** Add lines 39 through 42. Copy the total to line 86. \$0.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No  
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.  
☐ Yes Fill in the information below.

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

Debtor Ameritrans Capital Corporation Case number (If known) \_\_\_\_\_

Name

55.1. 31 State Street, Month to \$0.00 \$0.00  
Boston, MA month lease

55.2. 50 Jericho Debtor is \$0.00 \$0.00  
Quadrangle, Jericho, subtenant  
NY under  
unexpired  
lease; property  
abandoned  
since 2014

56. **Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
 Copy the total to line 88.

**\$0.00**

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

**Current value of  
debtor's interest**

71. **Notes receivable**

Description (include name of obligor)

**Note from Castle Mountain Capital, LLC with outstanding principal amount of \$215,225.93. Parties entered into repayment agreement; monthly payment amount tied to obligor's collections**

215,225.93 - 215,225.93 =  
 Total face amount doubtful or uncollectible amount

**Unknown**

**Note from Castle Mountain Capital, LLC with outstanding principal balance of \$106,260. Note is stale, and statute of limitations may have expired. Debtor believes note is uncollectible in any event.**

106,260.00 - 106,260.00 =  
 Total face amount doubtful or uncollectible amount

**\$0.00**

Debtor Ameritrans Capital Corporation Case number (If known) \_\_\_\_\_  
Name

72. **Tax refunds and unused net operating losses (NOLs)**  
Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

D&O Policy - Catlin Specialty Insurance Company

Unknown

D&O Policy - XL Specialty Insurance Company

Unknown

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

Claim against Infinity Capital / Michael Feinsod

\$8,188.28

Nature of claim Conversion of corporate funds

Amount requested \$8,188.28

**Judgment against guarantors of partnership obligations for 238 W. 108 Realty LLC. Debtor has been unable to collect on the judgment and believes it may be uncollectible.**

\$0.00

Nature of claim Judgment on personal guaranty

Amount requested \$100,000.00

**Claims against former officers and directors for mismanagement of corporation**

Unknown

Nature of claim Breach of fiduciary duty

Amount requested \$0.00

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$8,188.28

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor Ameritrans Capital Corporation Case number (If known) \_\_\_\_\_  
Name

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$26,677.63</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$1,297.89</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$700,000.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<u>\$8,188.28</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$736,163.80</u>	+ 91b. <u>\$0.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$736,163.80</u>

**Fill in this information to identify the case:**

Debtor name **Ameritrans Capital Corporation**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

**12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

**Fill in this information to identify the case:**

Debtor name **Ameritrans Capital Corporation**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	<b>Nonpriority creditor's name and mailing address</b> <b>Arthur D. Little</b> <b>537 Lewis Wharf</b> <b>Boston, MA 02110</b>  Date(s) debt was incurred <u>1/1/15-6/30/16</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Board of Directors fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,000.00</b>
3.2	<b>Nonpriority creditor's name and mailing address</b> <b>Bloomberg Finance LP</b> <b>PO Box 416604</b> <b>Boston, MA 02241</b>  Date(s) debt was incurred <u>6/3/13-7/10/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,113.43</b>
3.3	<b>Nonpriority creditor's name and mailing address</b> <b>Burruano Dolan LLP</b> <b>200 Business Park Dr</b> <b>Suite 307</b> <b>Armonk, NY 10504</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Accounting fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,000.00</b>
3.4	<b>Nonpriority creditor's name and mailing address</b> <b>Capital Resource Management Inc.</b> <b>31 State Street</b> <b>6th Floor</b> <b>Boston, MA 02109</b>  Date(s) debt was incurred <u>September 2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Rent</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,000.00</b>

Debtor	<b>Ameritrans Capital Corporation</b> <small>Name</small>	Case number (if known) _____
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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>CRC Insurance Services Inc.</b> <b>One Metroplex Drive</b> <b>Suite 400</b> <b>Birmingham, AL 35209</b> Date(s) debt was incurred <u>6/13-1/14</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Landlord</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$72,684.31</b>
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3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Creditors Adjustment Bureau</b> <b>PO Box 5932</b> <b>Sherman Oaks, CA 91413</b> Date(s) debt was incurred <u>3/5/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Collection agency for RR Donnelly</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
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3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Delaware Secretary of State</b> <b>401 Federal Street</b> <b>Dover, DE 19901</b> Date(s) debt was incurred <u>2013</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>2013 2nd est tax</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,540.00</b>
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3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Elk Associates Funding Corporation</b> <b>747 Third Avenue, 4th Floor</b> <b>New York, NY 10017</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>SBA loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$12,339,926.76</b>
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3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Elliot Singer</b> <b>4101 Gulf Shore Blvd North</b> <b>Unit 4 North</b> <b>Naples, FL 34103</b> Date(s) debt was incurred <u>10/1/12-6/30/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Board of Directors fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$22,250.00</b>
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3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Fairview Investment Services</b> <b>1330 St. Mary's Street</b> <b>Suite 400</b> <b>Raleigh, NC 27605</b> Date(s) debt was incurred <u>4/30/13-9/13/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31,249.98</b>
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3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Frank Strohm</b> <b>104 Rowland Ave</b> <b>Fairfield, CT 06824</b> Date(s) debt was incurred <u>1/1/15-6/30/15</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Board of Directors fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,000.00</b>
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Debtor	<b>Ameritrans Capital Corporation</b> <small>Name</small>	Case number (if known) _____
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3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Gary Granoff</b> <b>c/o Edward M. Spiro</b> <b>Morvillo Abramowitz Grand Iason &amp; Anello</b> <b>565 Fifth Avenue</b> <b>New York, NY 10017</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Claim for indemnification</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Howard Sommer</b>  Date(s) debt was incurred <u><b>10/1/12-6/30/13</b></u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Board of Directors fees</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$23,750.00</b>
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3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Ivan Wolpert</b>  Date(s) debt was incurred <u><b>10/1/12-6/30/13</b></u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Board of Directors fees</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$22,250.00</b>
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3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Ivan Wolpert</b> <b>c/o Justin V. Shur</b> <b>MoloLamken LLP</b> <b>540 Madison Ave</b> <b>New York, NY 10022</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Claim for indemnification</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.16	<b>Nonpriority creditor's name and mailing address</b> <b>John Laird</b> <b>481 Canoe Hill Road</b> <b>New Canaan, CT 06840</b>  Date(s) debt was incurred <u><b>10/1/12-6/30/13</b></u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Board of Directors fees</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$24,500.00</b>
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3.17	<b>Nonpriority creditor's name and mailing address</b> <b>John Laird</b> <b>481 Canoe Hill Road</b> <b>New Canaan, CT 06840</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Claim for indemnification</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Katten Muchin Rosenman LLP</b> <b>575 Madison Ave</b> <b>New York, NY 10022</b>  Date(s) debt was incurred <u><b>5/14/13-8/19/13</b></u> Last 4 digits of account number <u><b>0581</b></u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Legal Services</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$102,144.00</b>
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Debtor	<b>Ameritrans Capital Corporation</b> <small>Name</small>	Case number (if known) _____
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3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Markit WSO Corporation</b> <b>13455 Noel Road</b> <b>Suite 1100, LB#22</b> <b>Dallas, TX 75240</b>  Date(s) debt was incurred <u>5/29/13-6/11/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$3,565.86</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Morris James LLP</b> <b>500 Delaware Avenue</b> <b>Suite 1500</b> <b>Wilmington, DE 19899</b>  Date(s) debt was incurred <u>2/24/15</u> Last 4 digits of account number <u>0001</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$599.06</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	<b>Nonpriority creditor's name and mailing address</b> <b>New York City Department of Finance</b> <b>66 John Street, Room 104</b> <b>New York, NY 10038</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$271.65</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Account 123113</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Peter Boockvar</b> <b>11 Vanderbilt Drive</b> <b>Livingston, NJ 07039</b>  Date(s) debt was incurred <u>10/1/12-6/30/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$23,250.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Board of Directors fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Peter Boockvar</b> <b>11 Vanderbilt Drive</b> <b>Livingston, NJ 07039</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>Unknown</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Claim for indemnification</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Richard Feinstein</b> <b>c/o Justin V. Shur</b> <b>540 Madison Avenue</b> <b>New York, NY 10022</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>Unknown</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Claim for indemnification</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Richard L. Feinstein, CPA</b> <b>44 Hedgerow Lane</b> <b>Jericho, NY 11753</b>  Date(s) debt was incurred <u>6/23/13-7/7/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$12,971.85</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Consulting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Ameritrans Capital Corporation</b> Name	Case number (if known)
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3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Richards Layton &amp; Finger</b> <b>One Rodney Square</b> <b>920 North King Street</b> <b>Wilmington, DE 19801</b>  Date(s) debt was incurred <u>7/12/13</u> Last 4 digits of account number <u>1374</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$27,272.36</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.27	<b>Nonpriority creditor's name and mailing address</b> <b>Robert C. Ammerman</b> <b>343 Commercial St, TH#18</b> <b>Boston, MA 02109</b>  Date(s) debt was incurred <u>1/1/15-6/30/16</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$15,000.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Board of Directors fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.28	<b>Nonpriority creditor's name and mailing address</b> <b>RR Donnelley</b> <b>c/o Creditors Adjustment Bureau</b> <b>PO Box 5932</b> <b>Sherman Oaks, CA 91413</b>  Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$37,244.10</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Shareholder.com</b> <b>c/o Wells Fargo Bank</b> <b>Lockbox 30200</b> <b>PO Box 8500</b> <b>Philadelphia, PA 19178</b>  Date(s) debt was incurred <u>4/22/13-7/24/13</u> Last 4 digits of account number <u>5126</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$4,772.25</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Silvia Mullens</b> <b>c/o Justin V. Shur</b> <b>540 Madison Avenue</b> <b>New York, NY 10022</b>  Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>Unknown</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Claim for indemnification</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.31	<b>Nonpriority creditor's name and mailing address</b> <b>Stephen H. Tarnofsky, CPA</b> <b>2872 Rosebud Avenue</b> <b>Merrick, NY 11566</b>  Date(s) debt was incurred <u>7/10/13</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$2,200.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Consulting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.32	<b>Nonpriority creditor's name and mailing address</b> <b>Steven Etra</b> <b>2 Heather Hill</b> <b>Brookville, NY 11545</b>  Date(s) debt was incurred <u>10/1/12-6/30/13</u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <span style="float: right;"><b>\$22,750.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Board of Directors fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Ameritrans Capital Corporation</b> <small>Name</small>	Case number (if known) _____
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3.33	<b>Nonpriority creditor's name and mailing address</b> <b>Steven Etra</b> <b>2 Heather Hill</b> <b>Glen Head, NY 11545</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Claim for indemnification</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.34	<b>Nonpriority creditor's name and mailing address</b> <b>Surge Electronic Media Group</b> <b>PO Box 444</b> <b>Hewlett, NY 11557</b>  Date(s) debt was incurred <u>9/1/13-10/1/13</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Vendor</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,779.62</b>
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3.35	<b>Nonpriority creditor's name and mailing address</b> <b>Sutherland Asbill &amp; Brennan LLP</b> <b>700 Sixth Street, NW</b> <b>Suite 700</b> <b>Washington, DC 20001</b>  Date(s) debt was incurred <u>6/5/14</u> Last 4 digits of account number <u>0001</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Legal Services</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$444.00</b>
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3.36	<b>Nonpriority creditor's name and mailing address</b> <b>Wells Fargo Financial Leasing Inc.</b> <b>PO Box 6434</b> <b>Carol Stream, IL 60197</b>  Date(s) debt was incurred <u>11/9/13-1/10/14</u> Last 4 digits of account number <u>0001</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u><b>Vendor</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$874.10</b>
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**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Justin V. Shur</b> <b>MoloLamken</b> <b>540 Madison Ave</b> <b>New York, NY 10022</b>	Line <u>3.17</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.2	<b>Justin V. Shur</b> <b>MoloLamken</b> <b>540 Madison Ave</b> <b>New York, NY 10022</b>	Line <u>3.23</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.3	<b>Justin V. Shur</b> <b>MoloLamken</b> <b>540 Madison Avenue</b> <b>New York, NY 10022</b>	Line <u>3.33</u>  <input type="checkbox"/> Not listed. Explain _____	—
4.4	<b>SBA as Receiver for Elk Assoc. Funding</b> <b>attn: Kevin Dahill, Principal Agent</b> <b>1100 G Street Northwest, 11th Floor</b> <b>Washington, DC 20005</b>	Line <u>3.8</u>  <input type="checkbox"/> Not listed. Explain _____	—

Debtor **Ameritrans Capital Corporation**  
Name

Case number (if known)

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 12,854,403.33
5c.	\$ 12,854,403.33

Fill in this information to identify the case:

Debtor name **Ameritrans Capital Corporation**

United States Bankruptcy Court for the: **DISTRICT OF MASSACHUSETTS**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Sublease for one office; \$1,000/mo**

State the term remaining **month to month**

List the contract number of any government contract \_\_\_\_\_

**Capital Resource Management, Inc.  
31 State Street  
6th Floor  
Boston, MA 02109**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Sublease - debtor subtenant under unexpired lease; property has been abandoned since 2014 July 2017**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**CRC Insurance Services, Inc.  
One Metroplex Drive  
Birmingham, AL 35209**

**Fill in this information to identify the case:**

Debtor name Ameritrans Capital Corporation

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 _____	Street _____ _____ City _____ State _____ Zip Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

**Fill in this information to identify the case:**

Debtor name Ameritrans Capital Corporation

United States Bankruptcy Court for the: DISTRICT OF MASSACHUSETTS

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None.

**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year**

**From the beginning of the fiscal year to filing date:**  
From 1/01/2016 to **Filing Date**

**Sources of revenue**  
Check all that apply

☒ Operating a business

☐ Other \_\_\_\_\_

**Gross revenue**  
(before deductions and exclusions)

**\$0.00**

**For prior year:**  
From 1/01/2015 to 12/31/2015

☒ Operating a business

☐ Other \_\_\_\_\_

**\$0.00**

**For year before that:**  
From 1/01/2014 to 12/31/2014

☒ Operating a business

☐ Other \_\_\_\_\_

**\$0.00**

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

**Creditor's Name and Address**

**Dates**

**Total amount of value**

**Reasons for payment or transfer**  
*Check all that apply*

Debtor **Ameritrans Capital Corporation**

Case number (if known) \_\_\_\_\_

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <b>Capital Resource Management, Inc.</b> <b>31 State Street</b> <b>6th Fl.</b> <b>Boston, MA 02109</b>	<b>9/12/16</b>	<b>\$10,010.50</b>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <b>Rent</b>

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. <b>Ammerman v. Feinsod et al</b> <b>8719</b>	<b>Declaratory judgment</b>	<b>Delaware Court of Chancery</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. <b>SEC v. Stein</b> <b>C.A. No. 09-03125-RJS</b>	<b>Receivership; Receiver filed motion for order to show cause against Debtor seeking payment of funds to Receiver</b>	<b>US District Court for the SDNY</b>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded



Debtor **Ameritrans Capital Corporation**

Case number (if known)

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.3.	<b>Ameritrans Capital Corp. v. XL Specialty Insurance Co. C.A. No. N14C-10-019 (EMD)</b>	<b>Insurance coverage dispute</b>	<b>Delaware Superior Court Newcastle County</b>	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	<b>U.S. Small Business Administration v. Elk Associates Funding Corp. 13-1326-LAW (DNY)</b>	<b>Receivership; receiver has made demand upon debtor for payments of amounts due to Elk Associates</b>	<b>US District Court EDNY</b>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

**Part 4: Certain Gifts and Charitable Contributions**

**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses**

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Ameritrans Capital Corporation**

Case number (if known)

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>Casner &amp; Edwards, LLP 303 Congress Street Boston, MA 02210</b>		<b>September 14, 2016</b>	<b>\$6,500.00</b>
	Email or website address <b>goldberg@casneredwards.com</b>			
	Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. <b>50 Jericho Quadrangle, Suite 109 Jericho, NY 11753</b>	

**Part 8: Health Care Bankruptcies**

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:  
- diagnosing or treating injury, deformity, or disease, or  
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

**Part 9: Personally Identifiable Information**

Debtor **Ameritrans Capital Corporation**

Case number (if known) \_\_\_\_\_

**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Iron Mountain 1000 Campus Drive Collegeville, PA 19426	Robert Ammerman, 31 State Street, 6th Fl, Boston MA 02109	Business records	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☒ None

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Debtor **Ameritrans Capital Corporation**

Case number (if known) \_\_\_\_\_

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed EIN: From-To
25.1. SOHA Terrace LLC c/o Hans Futterman/RGS Holdings LLC 265 West 122nd Street, Suite C New York, NY 10027	Real estate investment	EIN: From-To
25.2. MBS Sage Creek Ltd	Real estate investment	EIN: From-To
25.3. MBS Walnut Creek Ltd	Real estate investment	EIN: From-To
25.4. 238 W. 108 Realty LLC	Real estate investment	EIN: From-To

Debtor **Ameritrans Capital Corporation**

Case number (if known) \_\_\_\_\_

Business name address		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
			Dates business existed EIN: From-To
25.5.	<b>633 Mead Street LLC</b>	<b>Real estate investment</b>	EIN: From-To
25.6.	<b>MBS Colonnade, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.7.	<b>Asset Recovery &amp; Management, LLC</b>	<b>Consumer receivable collections</b>	EIN: From-To
25.8.	<b>CMCA, LLC</b>	<b>Consumer receivable collections</b>	EIN: From-To
25.9.	<b>Bradway Capital GAB LLC</b>	<b>Bicycle manufacturing</b>	EIN: From-To
25.10	<b>Fusion Telecommunications</b>	<b>Internet telephony</b>	EIN: From-To
25.11	<b>MBS Serrano, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.12	<b>EraGen Biosciences</b>	<b>Analytic Compounds</b>	EIN: From-To
25.13	<b>MBS Lodge at Stone Oak, Ltd</b>	<b>Real estate investment</b>	EIN: From-To
25.14	<b>MBS Steeplecrest, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.15	<b>MBS Huntwick, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.16	<b>MBS Cranbrook, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.17	<b>MBS Briar Meadows, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.18	<b>MBS Indian Hollow, Ltd.</b>	<b>Real estate investment</b>	EIN: From-To
25.19	<b>Elk Associates Funding Corp.</b>	<b>Small business investment</b>	EIN: From-To

Debtor **Ameritrans Capital Corporation**

Case number (if known)

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. <b>Dominic Granito</b> <b>134 King Street</b> <b>Staten Island, NY 10308</b>	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26b.1. <b>Rosen Seymour Shapss Martin</b> <b>757 Third Avenue, Sixth Floor</b> <b>New York, NY 10017</b>	<b>2013</b>

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address
------------------

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
--	-------------------	---

**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
<b>Robert Ammerman</b>	<b>31 State Street</b> <b>6th Floor</b> <b>Boston, MA 02109</b>	<b>Interim CEO and Chairman of the Board</b>	

**29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**

☐ No

☒ Yes. Identify below.

Debtor **Ameritrans Capital Corporation**

Case number (if known) \_\_\_\_\_

Name	Address	Position and nature of any interest	Period during which position or interest was held
Arthur Little	537 Lewis Wharf Boston, MA 02110	Director	July 2013 to July 2016
Name	Address	Position and nature of any interest	Period during which position or interest was held
Frank Stroh	104 Rowland Ave Fairfield, CT 06824	Director	July 2013 to July 2016

**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No  
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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**31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☐ No  
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Ameritrans Capital Corporation	EIN: 52-2102424

**32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 3, 2016**

**/s/ Robert Ammerman**  
 Signature of individual signing on behalf of the debtor

**Robert Ammerman**  
 Printed name

Position or relationship to debtor **Interim CEO and Chairman of the Board**

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

- ☒ No  
☐ Yes

**United States Bankruptcy Court  
District of Massachusetts**

In re **Ameritrans Capital Corporation**

Debtor(s)

Case No.

Chapter

**7**

**VERIFICATION OF CREDITOR MATRIX**

I, the Interim CEO and Chairman of the Board of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **October 3, 2016**

**/s/ Robert Ammerman**

**Robert Ammerman/Interim CEO and Chairman of the Board**  
Signer/Title



Arthur D. Little  
537 Lewis Wharf  
Boston, MA 02110

411 State Street  
Unit 4 North  
Naples, FL 34103

13455 Noel Road  
Suite 1100, LB#22  
Dallas, TX 75240

Bloomberg Finance LP  
PO Box 416604  
Boston, MA 02241

Fairview Investment Services  
1330 St. Mary's Street  
Suite 400  
Raleigh, NC 27605

Morris James LLP  
500 Delaware Avenue  
Suite 1500  
Wilmington, DE 19899

Burruano Dolan LLP  
200 Business Park Dr  
Suite 307  
Armonk, NY 10504

Frank Strohm  
104 Rowland Ave  
Fairfield, CT 06824

New York City Department of Finance  
66 John Street, Room 104  
New York, NY 10038

Capital Resource Management Inc.  
31 State Street  
6th Floor  
Boston, MA 02109

Gary Granoff  
c/o Edward M. Spiro  
Morvillo Abramowitz Grand Iason & Anello  
565 Fifth Avenue  
New York, NY 10017

Peter Boockvar  
11 Vanderbilt Drive  
Livingston, NJ 07039

Capital Resource Management, Inc.  
31 State Street  
6th Floor  
Boston, MA 02109

Howard Sommer

Richard Feinstein  
c/o Justin V. Shur  
540 Madison Avenue  
New York, NY 10022

CRC Insurance Services Inc.  
One Metroplex Drive  
Suite 400  
Birmingham, AL 35209

Ivan Wolpert  
c/o Justin V. Shur  
MoloLamken LLP  
540 Madison Ave  
New York, NY 10022

Richard L. Feinstein, CPA  
44 Hedgerow Lane  
Jericho, NY 11753

CRC Insurance Services, Inc.  
One Metroplex Drive  
Birmingham, AL 35209

John Laird  
481 Canoe Hill Road  
New Canaan, CT 06840

Richards Layton & Finger  
One Rodney Square  
920 North King Street  
Wilmington, DE 19801

Creditors Adjustment Bureau  
PO Box 5932  
Sherman Oaks, CA 91413

Justin V. Shur  
MoloLamken  
540 Madison Ave  
New York, NY 10022

Robert C. Ammerman  
343 Commercial St, TH#18  
Boston, MA 02109

Delaware Secretary of State  
401 Federal Street  
Dover, DE 19901

Justin V. Shur  
MoloLamken  
540 Madison Avenue  
New York, NY 10022

RR Donnelley  
c/o Creditors Adjustment Bureau  
PO Box 5932  
Sherman Oaks, CA 91413

Elk Associates Funding Corporation  
747 Third Avenue, 4th Floor  
New York, NY 10017

Katten Muchin Rosenman LLP  
575 Madison Ave  
New York, NY 10022

SBA as Receiver for Elk Assoc. Fund  
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Sutherland Asbill & Brennan LLP  
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Washington, DC 20001

Wells Fargo Financial Leasing Inc.  
PO Box 6434  
Carol Stream, IL 60197

**United States Bankruptcy Court  
District of Massachusetts**

In re **Ameritrans Capital Corporation**

Debtor(s)

Case No.

Chapter

**7**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Ameritrans Capital Corporation** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

**CEDE & Co (FAST)**  
**PO Box 20**  
**New York, NY 10274**

**Infinity Capital Partners LP**  
**c/o Michael Feinsod**  
**60 The Intervale**  
**Roslyn, NY 11576**

☐ None [*Check if applicable*]

**October 3, 2016**

Date

**/s/ Michael J. Goldberg**

**Michael J. Goldberg 551869**

Signature of Attorney or Litigant

Counsel for **Ameritrans Capital Corporation**

**Casner & Edwards, LLP**

**303 Congress Street**

**Boston, MA 02210**

**617-426-5900 Fax:617-426-8810**